



Please type a plus sign (+) inside this box → ☐

PTO/SB/122 (11-96)  
Approved for use through 6/30/99. OMB 0651-0035  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

#10  
+ 840  
SP

**CHANGE OF  
CORRESPONDENCE ADDRESS**  
*Application*

Address to:  
Assistant Commissioner for Patents  
Washington, D.C. 20231

Application Number	09/185,057
Filing Date	11/2/98
First Named Inventor	Chuen-Der Lien
Group Art Unit	2818
Examiner Name	H. Ho
Attorney Docket Number	1548

Please change the Correspondence Address for the above-identified application to:

☐

Customer Number

Type Customer Number here

Place Customer  
Number Bar Code  
Label here

OR

☒

Firm or  
Individual Name

Integrated Device Technology, Inc.

Address

Patent Dept.

Address

2975 Stender Way, M/S C4-25

City

Santa Clara

State

CA

ZIP

95054

Country

USA

Telephone

(408) 654-6561

Fax

(408) 492-8454

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

☐

Applicant.

☐

Assignee of record of the entire interest.  
Certificate under 37 CFR 3.73(b) is enclosed.

☒

Attorney or agent of record.

Typed or  
Printed Name

Isabelle R. McAndrews 34,998

Signature

*Isabelle R McAndrews*

Date

5/24/00

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

OK to Enter

+